



DEPARTMENT OF THE NAVY  
NAVAL MEDICAL COMMAND  
WASHINGTON, D.C. 20372-5120

IN REPLY REFER TO  
NAVMEDCOMINST 6630.2  
MEDCOM-62  
1 Mar 89

NAVMEDCOM INSTRUCTION 6630.2

From: Commander, Naval Medical Command  
To: Ships and Stations Having Medical Department Personnel

Subj: REIMBURSEMENT FEES FOR DEPENDENT DENTAL PROSTHESES

Ref: (a) Title 10 U.S.C. 1077(a)  
(b) SECNAVINST 6320.8D  
(c) NAVMEDCOMNOTE 6320 (Subj: Medical dental, subsistence rates, and hospitalization bills) (latest issuance)  
(d) NAVMED P-5020, Resource Management Handbook-Appendix F

1. Purpose. To provide instructions for collecting fees for dental prostheses constructed for dependents in military treatment facilities.

2. Background. Reference (a) authorizes providing dental care to dependents on a space available basis. Reference (b) directs that the dependents who receive prosthetic devices (other than artificial limbs and artificial eyes) must reimburse the United States for these prostheses. The fees are established by the Department of Defense (DOD) Dental Chiefs' Council (DCC) and are based on a triservice analysis of material costs for production of prostheses at DOD facilities.

3. Definitions. The following definitions apply for this instruction:

a. Prostheses include removable partial dentures, complete dentures, treatment partial dentures, and fixed partial dentures.

b. Restorations and appliances, though fabricated in dental laboratories, are not considered prostheses. No reimbursement is required for:

- (1) Single crowns not integral to a fixed prosthesis.
- (2) Splints and stents.
- (3) Orthodontic appliances.
- (4) Space maintainers.
- (5) Mouthguards.

S/N 0510-LD-054-2395

#### 4. Action

a. The Commander, Naval Medical Command (COMNAVMEDCOM) will assign a Navy representative to the DOD DCC. The Navy representative will work with the other members of the DCC, to determine uniform rates of reimbursement for production of prostheses for dependents. These rates must be established annually, by 1 August, and provided to COMNAVMEDCOM (MEDCOM-13) for publication and distribution to medical and dental activities worldwide. The rates must conform to the statutory guidance of reference (a), i.e., reflect "costs to the United States" for the prosthetic devices furnished to dependents. Revised rates become effective on the first day of the new fiscal year.

b. Collections resulting from dependent dental prostheses must be credited as funded earnings to the activity holding the expense operating budget (EOB) for the treating dental activity. The EOB holders will notify activities of the appropriation accounting data and cost code to be used to credit reimbursements.

c. Where no hospital collection agent is readily available to dependents, the Navy or Marine Corps disbursing officer at the local base or station must:

(1) Accept collections from dependents or their sponsors in payment for dental prostheses.

(2) Credit such receipts for dental prostheses to the appropriation accounting data provided by the local medical or dental activity.

(3) Furnish a cash receipt to the payer indicating the purpose for collection (dental prosthesis); amount received; date received; and appropriation accounting data credited.

(4) Forward a copy of the deposit document NAVCOMPT Form 2277 showing appropriation data to the local dental activity providing treatment to the patient.

d. The dental activity administering patient care will provide for collection of reimbursement fees for dependent dental prostheses in the following manner:

(1) Record Entry. The attending dentist will make an entry in the patient dental record identifying the specific prosthesis and indicating that the prosthesis is required for treatment.

(2) Notification of Fees. When the requirement for a prosthesis has been documented by the attending dentist, the patient contact point at the dental clinic will notify the patient

of the prosthesis fee using the current edition of references (c) and (d).

(3) Payment. Upon notification of the prosthesis fee, the dependent or sponsor must make payment. Payment should be made before the next scheduled appointment; but, in any case, must be made within 30 days of notification, or before providing the prosthetic device, whichever occurs first. Clinics cannot provide prosthetic devices to dependents without prior payment.

(a) Where payment is made to a hospital collection agent, the dental clinic must prepare a DD 7A on the patient, indicating the type of prosthesis required, in the terminology of references (c) and (d). The patient must take the DD 7A to the collection agent and pay for the prosthesis. The agent must establish a patient account ledger, indicating charges, purpose, payment amount, and date of payment. A numbered receipt must be provided to the patient, reflecting this information. Earnings will be treated as funded reimbursable earnings accruing to the expense operating budget holder for the treating dental activity.

(b) Where payment is made to a local disbursing officer, the dental activity will prepare a memorandum to the disbursing officer, reference this instruction, and indicate patient name, sponsor social security number, type of prostheses, amount to be paid, and the appropriation accounting data. The disbursing officer must follow the guidelines in paragraph 4c. The treating dental activity must forward a copy of the deposit document to the EOB holder to be used for recording funded earnings.

(4) Delivery of Prosthesis. Patients are required to provide proof-of-payment (i.e., collection agent or disbursing officer receipt) to the dental clinic before delivery of prostheses. The dental activity will enter the receipt number into the dental record at that time.

5. Forms. DD 7A (8-76), Report of Treatment Furnished Pay Patients, Outpatient, S/N 0102-LF-000-0075, and NAVCOMPT 2277 (2-81), Voucher for Disbursement and/or Collection, S/N 0104-LF-702-2770, are available from COG 1I stock points of the Navy Supply System and can be ordered per NAVSUP-2002.

  
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